

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS   | ID NO.        | DATE            |
|---------------------------|------------|---------------|-----------------|
| FEE DETERMINATION         | <i>ML</i>  |               | <i>06-25-01</i> |
| O.I.P.E. CLASSIFIER       | <i>MA</i>  |               | <i>9/5/01</i>   |
| FORMALITY REVIEW          | <i>C.V</i> | <i>503</i>    | <i>08/14/01</i> |
| RESPONSE FORMALITY REVIEW | <i>SA</i>  | <i>SL1039</i> | <i>11/12/01</i> |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE COPY

*ICB11*  
*08/15/01*  
*11/12/01*